

Work Order ID 91597

91597

Page 1

October-17-12 9:50:32 AM

Item ID: D2958

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Window

Start Date: 10/11/12

Start Qty: 2.00

2

Cust Item ID:

Required Date: 10/19/12

Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

Draw Nbr

Revision Nbr

D2958

Rev E

100

0.00

100

FLOW WATER JET

Waterjet

Memo

0.00

FLOW CNC Waterjet

*****MAKE SURE TO USE WATERJET BRICK*****

Polycast II .125"

Prog Rev: E
Prog: E

110

0.00

110

QC2- Inspect parts off machine FAI/FAIB

QC

Memo

0.00

Quality Control

120

0.00

120

QC8- Inspect parts - second check

QC

Memo

0.00

Quality Control

2 0 Jm 12-11-2

2 0 Jm 12-11-2

x2 68-20 DAS 12/11/12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

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Reference:

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Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop ***NR2***

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

130

130

Thermoform

Thermoforming Machine

THERMOFORMING MACHINE

0.00

Memo

0.00

Thermoform as per Dwg D2958 and Folio FTA005Dwg.
Rev. _____ Folio Rev. _____

x2

DAS
07
8-89

12/11/12

140

140

QC

Quality Control

QC2- Inspect parts off machine FAI/FAIB

0.00

Memo

0.00

Check product for scratches mal-formation or any other non conformances.

x2

DAS
07
8-89

12/11/12

150

150

QC

Quality Control

QC8- Inspect parts - second check

0.00

Memo

0.00

DAS
16
8-89 12/11/12

(x2)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION <div style="display: flex; justify-content: space-around;"> Rework <input type="checkbox"/> Skid-tube <input type="checkbox"/> Crosstube <input type="checkbox"/> Water Jet <input type="checkbox"/> Engineering <input type="checkbox"/> </div> <div style="display: flex; justify-content: space-around;"> Scrap <input type="checkbox"/> Machining <input type="checkbox"/> Small Fab <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Quality <input type="checkbox"/> </div> <div style="display: flex; justify-content: space-around;"> Use-as-is <input type="checkbox"/> Thermoforming <input type="checkbox"/> Finishing <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Other <input type="checkbox"/> </div> <div style="display: flex; justify-content: space-around;"> Work Order Update <input type="checkbox"/> Large Fab <input type="checkbox"/> Composite <input type="checkbox"/> Supplier <input type="checkbox"/> </div>		AGAINST DEPARTMENT/PROCESS					
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Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY												
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Page 3

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2

Cust Item ID:

Required Date: 10/19/12

Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

160

Thermoform

Thermoforming Machine

HAND FINISHING THERMOFORMING

0.00

Memo

0.00

Water sand and buff to remove scratches as required Wrap in protective film

27

DAS
07
-89

12/11/12

170

170

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

Memo

0.00

DAS
16

12/11/12

~~27~~

~~12/11/12~~

180

180

Packaging

Packaging

Identify as per dwg & Stock Location: ST 208

0.00

Memo

0.00

27

SP
12-11-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 91597

October-17-12 9:50:32 AM

91597

Page 4

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Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Window

Start Date: 10/11/12

Start Qty: 2.00

2

Cust Item ID:

Required Date: 10/19/12

Req'd Qty: 2.00

2

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

190

QC21- Final Inspection - Work Order Release

0.00

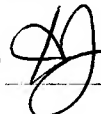
190

QC

Memo

0.00

Quality Control

12/11/13 

JMF

12-11-12

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Picklist Print

October-17-12 9:50:32 AM

Page 1

Work Order ID: 91597

Parent Item: D2958

Parent Item Name: Window

Start Date: 10/11/12

Required Date: 10/19/12

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP E: 01.09.25 Done by outside contract SM
 IPP F: 07.06.26 Thermoform in house DL
 IPP G: 07.09.28 Rev E dwg EC verified by: DD
 IPP H: 08.11.24 Step 8 revised per w/o 41134 KJ Verified by: EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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MACRLICS.125

1/8" Polycast II Sheet

Purchased

No

100

sf

91.3490

2.58

5431579
6.5

JM12-11-2

Location

Loc Qty

Loc Code

MAT019

91.349

110633

3

117324

0.2467

117431

10.7967

119591

15.16

121850

62.1456

121850

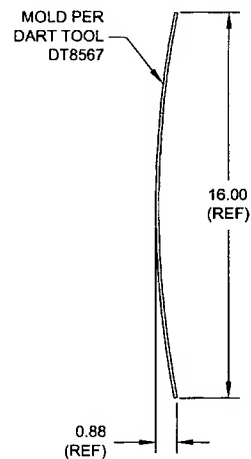
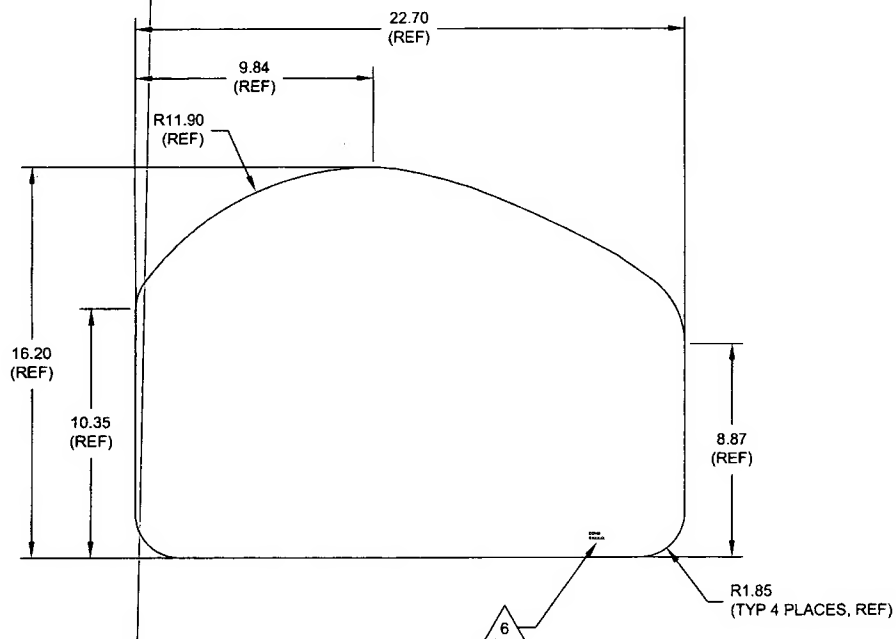
NCR: Yes / No

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91597

D2958 FLAT PATTERN

RELEASED
07.09.22

D2958 WINDOW:

- 1) MATERIAL: POLYCAST II CLEAR ACRYLIC SHEET PER MIL-P-5425 OR PLEXIGLAS G CLEAR CAST ACRYLIC SHEET PER LP-391 TYPE 1 GRADE C, 0.125 THICK (REF, DART SPEC. M-ACRYLIC-S.125)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) REMOVE SHARP EDGES
- 6) IDENTIFICATION: ENGRAVE P/N "D2958" AND B/N ON LOWER EDGE USE 0.125" HIGH LETTERS TO MAXIMUM DEPTH OF 0.005"
- 7) WEIGHT: 1.58 +/- 0.35 LBS
- 8) MOLD PER DART TOOL DT8567

E	UPDATE DIMS PER PAR 188	DC	07.07.06
D	UPDATE MATERIAL PER NCR 029	SSH	06.04.13
C	REMOVE HOLES, UNIFORMLY SMALLER	CP	01.05.30
B	Ø0.156 HOLES WERE Ø0.141 (NCR 407)	CP	00.02.23
A	NEW ISSUE	CP	00.01.20
REV.	DESCRIPTION	BY	DATE
DESIGN	90	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	SC		
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.		DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DATE	07.07.06	COPYRIGHT © 2000 BY DART AEROSPACE LTD THIS DOCUMENT IS UNCLASSIFIED AND CONFIDENTIAL RIGHTS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	